



UNITED STATES PATENT AND TRADEMARK OFFICE

UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE

May 26, 2006

CENTRAL COAST PATENT AGENCY
PO BOX 187
AROMAS, CA 95004
US

Dear Sir/Madam,

Your refund request for 10534658 in the amount of \$75.00 has been denied .

Claims 13,14,17,18,19,20 are multiples the total count is 25. Fees are correct. bc

Sincerely,


RITA WHITE

PCT - National

703 308-9140 x231

PTO/BB/97 (12-97)
Approved for use through 8/30/00, OMB 0851-0031
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

In re: Request for Refund
Application No.: 10/534,658

Certificate of Transmission under 37 CFR 1.8

Attn: Refund

Fax No.: (571) 273-6500

I hereby certify that this correspondence is being facsimile transmitted to the
Patent and Trademark Office

on 02/14/2006

Date


Signature

Sheri Beasley

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify
each submitted paper.

Total Sheets Transmitted - 5

1. Request for Refund to Deposit Account 500534 - 1 sheets
2. Copy of September Monthly Statement of Deposit Account 500534 - 1 sheet
3. Copy of Transmittal Letter - 1 sheet
4. Copy of Filing Receipt - 1 sheet
5. Certificate of Transmission - 1 sheet

Following is a request for \$75.00 refund to Deposit Account 500534 for application 10/534,658.

If you do not receive all pages please call me at (831) 726-1457.

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 2654

Examiner: Unknown

In Re: Bernd Schonebeck
Case: 7103.00US
Serial No.: 10/534,658
Filed: 10/14/2005
Subject: Voice Processing System, Method for Allocating Acoustic and/or Written
Character Strings to Words or Lexical Entries

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR REFUND**Deposit Account No. 500534 under 37 CFR §1.26**

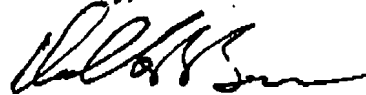
Dear Sir/Madam:

Applicant respectfully requests a refund to deposit account 500534 in the amount of
\$75.00.

On 05/10/2005 applicant filed a Utility Patent Application. Applicant paid for the correct number of total claims (22), but was charged an extra \$75 for extra claims (fee code 2615).

Enclosed are marked-up copies of page 2 of the transmittal letter, filing receipt and the Monthly Statement of Deposit Account for your review.

Sincerely,



Donald R. Boys
Reg. No. 35074

Central Coast Patent Agency, Inc.
P.O. Box 187
Aromas, CA 95004
(831) 726-1457



UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450
www.uspto.gov

MONTHLY STATEMENT
OF DEPOSIT ACCOUNT

To replenish your deposit account, detach and
return top portion with your check. Make check
payable to Director of Patents & Trademarks.

CENTRAL COAST PATENT AGENCY
DONALD R BOYS
P O BOX 187
AROMAS CA 95004

FINA

Account No.	500534
Date	9-30-05
Page	1

PLEASE SEND REMITTANCES TO:
U. S. Patent and Trademark Office
P.O. Box 70541
Chicago, IL 60673

DATE POSTED			CONTROL NO.	DESCRIPTION (Serial, Patent, TM, Order)	DOCKET NO.	FEE CODE	CHARGES/ CREDITS	BALANCE
MO.	DAY	YR.						
9	7	05	14	E-REPLENISHMENT		9203	-2000.00	2636.00
9	12	05	112	11155701		8021	40.00	2596.00
9	13	05	20	11003723	P5278	8007	80.00	2516.00
9	13	05	22	60620378	P5278	8007	80.00	2436.00
9	13	05	137	0157870022	P5278	8014	50.00	2386.00
9	16	05	20	11213351	P1946	2201	-700.00	3086.00
9	16	05	23	11213351		9204	-200.00	3286.00
9	16	05	23	10526259		9204	-180.00	3466.00
9	16	05	228	0120700768	SEMOTUS	8014	25.00	3441.00
9	16	05	229	0122230917	SEMOTUS	8014	25.00	3416.00
9	16	05	230	0125090645	SEMOTUS	8014	25.00	3391.00
9	16	05	231	0123780167	SEMOTUS	8014	25.00	3366.00
9	16	05	232	0130860554	SEMOTUS	8014	25.00	3341.00
9	16	05	233	0082110052	SEMOTUS	8014	25.00	3316.00
9	16	05	234	0082130407	SEMOTUS	8014	25.00	3291.00
9	16	05	235	0082170416	SEMOTUS	8014	25.00	3266.00
9	19	05	242	60620378	P5278	8021	40.00	3226.00
9	20	05	244	11221563	P2006	8021	40.00	3186.00
9	22	05	57	0165520041	P5278	8014	50.00	3136.00
9	28	05	189	11132840		8021	40.00	3096.00
9	28	05	204	11229289	9001.00US	8021	40.00	3056.00
9	28	05	209	11213351	P1946	8021	40.00	3016.00
9	29	05	1	10534658		9204	-50.00	3066.00
9	29	05	2	10534658		2615	75.00	2991.00
AN AMOUNT SUFFICIENT TO COVER ALL SERVICES REQUESTED MUST ALWAYS BE ON DEPOSIT				OPENING BALANCE	TOTAL CHARGES	TOTAL CREDITS	CLOSING BALANCE	
				636.00	775.00	3130.00	2991.00	

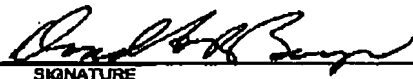
COPY

PTO-1390 (Rev. 03-2005)

Approved for use through 3/31/2007. OMB 0651-0021

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. (If known, see 37 CFR 1.5)		INTERNATIONAL APPLICATION NO.		ATTORNEY'S DOCKET NUMBER	
NA		PCT/EP2003/012639		7103.00US	
The following fees have been submitted				CALCULATIONS	PTO USE ONLY
21. <input checked="" type="checkbox"/> Basic national fee.....				\$ 300	
22. <input checked="" type="checkbox"/> Examination fee if international preliminary examination report prepared by USPTO and all claims satisfy provisions of PCT Article 33(1)-(4)..... \$100 All other situations..... \$200				\$ 200	
23. <input checked="" type="checkbox"/> Search fee Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority..... \$100 International Search Report prepared and provided to the Office..... \$400 All other situations..... \$500				\$ 500	
TOTAL OF 21, 22 and 23 =				\$ 1000	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE		
32 - 100 =	0 / 50 =	0	x \$250	\$ 0	
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(h)).				\$ 0	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	22 - 20 =	2	x \$ 50	\$ 100	
Independent claims	10 - 3 =	7	x \$200	\$ 1400	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360	\$ 360	
TOTAL OF ABOVE CALCULATIONS =				\$ 2860	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Fees above are reduced by 1/2.					
SUBTOTAL =				\$ 1430	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(i)).				\$ 0	
TOTAL NATIONAL FEE =				\$ 1430	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$49.00 per property				\$ 0	
TOTAL FEES ENCLOSED =				\$ 1430	
				Amount to be refunded:	\$
				Amount to be charged:	\$
<p>a. <input checked="" type="checkbox"/> A check in the amount of \$ 1430 to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 60-0634. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>					
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the international Application to pending status.					
SEND ALL CORRESPONDENCE TO:					
 SIGNATURE Donald R. Boys NAME 35,074					

COPY

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/534 658

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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15	1		1			
16		1		1		
17		2		2		
18		(1)		(1)		
19		(1)		(1)		
20		(1)		(1)		
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TOTAL IND.	10	↓	10	↓		↓
TOTAL DEP.	15	←	15	←		←
TOTAL CLAIMS	25		25			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						